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Attorney Docket No. S1123U

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Dan OZ	Conf. No.: 2837
Serial No.: 10/527,249	Examiner: UNKNOWN
Filed: March 9, 2005	Group Art Unit: 3762
For: PISTON-ACTUATED ENDOSCOPIC TOOL	

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


Dear Commissioner:

Submitted herewith for filing in the U.S. Patent and Trademark Office is the following:

- (1) PTO/SB/81 (Power of Attorney or Revocation of Power of Attorney with a New Power of Attorney and Correspondence Address); and
- (2) PTO/SB/96 (Statement under 37 CFR 3.73(b).

In the event this paper is not timely filed, Applicants petition for an appropriate extension of time. Please charge any fee deficiency or credit any overpayment to Deposit Account No. 14-0112.

Respectfully submitted,
THE NATH LAW GROUP



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PTO/SB/81 (07-08)

Approved for use through 12/31/2008. OMB 0851-0035

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**POWER OF ATTORNEY
OR
REVOCATION OF POWER OF ATTORNEY
WITH A NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/527,249
Filing Date	March 9, 2005
First Named Inventor	OZ, Dan
Title	Piston-Actuated Endoscopic Tool
Art Unit	3762
Examiner Name	UNKNOWN
Attorney Docket Number	S1123U

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

20529

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Dr. David Agronov

Date

3/12/08

Title and Company

Intellectual Property Manager - Stryker GI Ltd.

Telephone

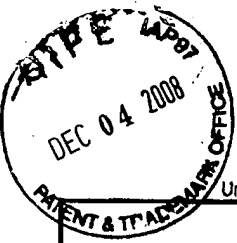
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: OZ, Dan
Application No./Patent No.: 10/527,249 Filed/Issue Date: March 9, 2005
Entitled: Piston-Actuated Endoscopic Tool

Stryker GI Ltd. _____, a CORPORATION
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- 1. ☒ the assignee of the entire right, title, and interest; or
- 2. ☐ an assignee of less than the entire right, title and interest
(The extent (by percentage) of its ownership interest is _____ %)

in the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy therefore is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

- 1. From: OZ, Dan To: Sightline Technologies, Ltd.

The document was recorded in the United States Patent and Trademark Office at
Reel 016933, Frame 0427, or for which a copy thereof is attached.

- 2. From: Sightline Technologies, Ltd. To: Stryker GI Ltd.

The document was recorded in the United States Patent and Trademark Office at
Reel 018210, Frame 0777, or for which a copy thereof is attached.

- 3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Dr. David Agranov
Signature

Dr. David Agranov
Printed or Typed Name

Intellectual Property Manager
Title

3/21/08
Date

(011) 073-7374747
Telephone Number